



# Interpreting and Acting on Patient Safety Culture Data: A Five-Point Guide for Leaders

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# Stop trying to boil the ocean

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In the rapidly evolving healthcare landscape, data play a pivotal role in identifying opportunities for improvement and fostering a culture of safety and quality.

To drive meaningful change, healthcare organization leaders must interpret and act on data effectively. Even veteran leaders can fall victim to “data paralysis” when interpreting their Surveys on Patient Safety Culture™ (SOPS®) scores.

This white paper is a comprehensive guide for healthcare leaders on interpreting data, determining focus areas for improvement and implementing actionable strategies based on data insights.

**Never question where to start again.**





# 1. Implement SMART goals

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## Interpreting healthcare data

Interpreting healthcare data requires a multifaceted approach. It involves analyzing various metrics, such as patient outcomes, operational efficiency and safety indicators.

Leaders must prioritize data that is SMART:



By focusing on SMART goals, leaders can ensure that the data they interpret drives actionable insights. Additionally, leaders must consider the influence of control — focusing on opportunities for improvement that are within their organization's sphere of influence.



## 2. Extract data to advocate for change

### Determining focus areas for improvement

Once healthcare leaders have interpreted their SOPS score data, the next step is determining focus areas for improvement. It is crucial to guide leaders in identifying manageable and realistic opportunities to effect change.

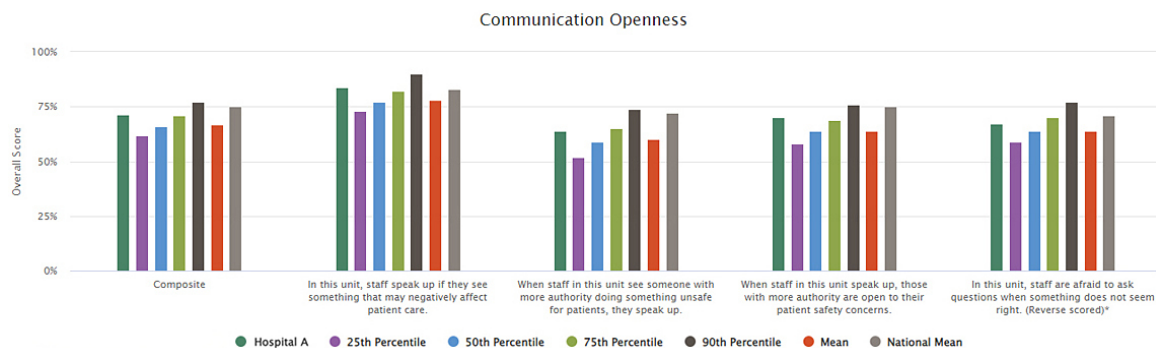
This may involve using tools like electronic medical records and algorithms to extract data that highlight change areas. You want to prioritize data points that directly correlate with your SMART goals.

#### Remember:

**SOPS scores aren't only required for The Joint Commission accreditation.**

There are many systematic, evidence-based patient safety initiatives you can create based on your data. With the right data on hand, you'll have the basis to set SMART goals to address improvement areas.

The right data will ground your safety and quality efforts, and help you focus on the best areas for improvement that you can report to leadership.



## 3. Implement actionable strategies

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### Meaningful change starts with data insights

To create meaningful change, healthcare leaders must implement actionable strategies based on data insights gleaned from SOPS results.

Practical examples may include incorporating protocols for effective handoffs into the electronic medical record, such as SBAR (Situation, Background, Assessment, Recommendations). It also may involve fostering an environment where clinicians feel comfortable reporting safety concerns without fear of retribution.

### SMART examples

To illustrate this, we've created a fictional example with the components mentioned above.

In this case, hospital A conducted and completed its SOPS survey and realized that hiring new staff, communication errors and “speak up” culture are their biggest improvement areas. To avoid an action plan with over 20 items, the hospital leadership decided to implement the SMART process to sort out the high-priority issues they could more easily achieve.

First, they recognized that hiring new staff needs improvement. However, they can't fully control this due to external factors, making this a hard-to-achieve goal. Instead, they'll focus on the “low-hanging fruit” where the hospital has more control: communicating errors and foster a speak up culture.

## Communication errors

Using the SMART method, Hospital A's leadership identified the following:



**SPECIFIC:** Using their low score on the communication indicator and collaboration with management and direct care staff, they identified that their handoff procedure needed significant improvement.



**MEASURABLE:** They could measure the effectiveness of their new handoff procedure in a few different ways. In the short term, they could measure the number of staff completing their form/checklist and updating the patient's EMR, and then send out staff surveys to gauge participation and satisfaction. In the long term, they could measure success by an improved score on their SOPS communication indicator.



**ACHIEVABLE:** Hospital A found that creating and implementing a new form/checklist with the input of the direct care staff, would take minimal time. It also would be easy for them to communicate the change in procedures to staff with little training and reminders.



**RELEVANT:** Hospital A found handoffs to be a pain point for clinicians. Therefore, by implementing this new procedure, they'd reduce staff friction.



**TIME-BOUND:** Hospital A could quickly implement this change and create accompanying materials.

Based on the SMART approach, the hospital was able to create this action item:

**Hospital A will focus on improving its handoff procedures by using a form/checklist to communicate the situation, assessment, background information and care recommendations. The hospital will also incorporate this information into the EMR as a part of the handoff procedure.**



## Speak up culture

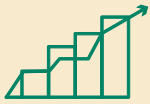
Using the SMART method, Hospital A identified the following:



**SPECIFIC:** Hospital A has few reported incidents. However, the leadership realizes this is due to their current culture and clinicians' reluctance to report adverse events. Hospital A wants to provide an environment where clinicians and team members feel comfortable raising safety issues. This means shifting from discipline to a learning approach. Using their low score on the communication indicator, they identified that their handoff procedure needed significant improvement. They also used shared decision making with management and direct care staff.



**MEASURABLE:** Hospital A can use a variety of tools and algorithms to manage cultural changes. Specifically, they can monitor increases in their reported incidents, conduct floor surveys where they can get direct feedback from staff, and see if there's a correlation between additional training and decreases in safety incidents.



**ACHIEVABLE:** Hospital A wants to see continuous improvement. To do this, they're going to focus on their achievable goals: more training and learning opportunities centered on incident reports, clear communication about cultural changes, and creation and completion of floor surveys.



**RELEVANT:** Hospital A found that clinicians were reluctant to report incidents. By shifting the culture from discipline to education, more staff are willing to work with administration and report incidents, building trust and accomplishing larger cultural safety goals.



**TIME-BOUND:** Hospital A knows that cultural changes take time, yet they can use their SMART goals to create short wins as they work toward their larger goals. They might continually check on progress in monthly, three-month or six-month increments.

Based on this they were able to create this action item:

**Hospital A will focus on building a culture of patient safety that prioritizes education over discipline. They'll make incident reporting anonymous to encourage participation and build trust.**

## 4. Sustain improvement efforts

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### Avoid frustration with manageable, achievable change

Sustaining improvement efforts is vital for long-term success. Healthcare organizations should consider revisiting initiatives year after year, especially those with continuous improvement goals.

This may involve incorporating feedback from staff and leveraging learning opportunities through professional organizations and leadership associations. Importantly, it is essential for leaders to understand that the time required to see changes working in the organization can vary based on factors such as the size of the organization and the level of leadership support for initiatives.

## 5. Collaborate for increased safety

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### Foster external relationships

Leaders should collaborate with professional organizations, state associations and other healthcare institutions to increase safety and quality across the industry. By sharing best practices, learning from others and engaging in continuous learning opportunities, healthcare leaders can drive positive change and foster a culture of safety.

### Top takeaways for leaders:

1. Live and breathe the culture of safety every day, promoting a mindset of continuous learning and improvement within your organization.
2. Staff engagement is key for long-term success. Engage and involve your staff in improvement processes. The closest people to the work should be the ones helping and participating in development plans.
3. Get out of data paralysis by creating SMART goals.
4. Use the tools and resources available to improve your SOPS survey data. The better your results, the faster you can target meaningful patient safety initiatives.

# Concrete culture safety improvement

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## Systematic, evidence-based, sustained improvement

Effective interpretation of and action on healthcare data are essential to drive meaningful change and improve patient outcomes.

By embracing the principles outlined in this whitepaper, healthcare leaders will be well equipped to leverage data effectively and drive positive change within their organizations.

## Decarbonization and resilience initiative

Go beyond your Surveys on Patient Safety Culture™ (SOPS®) scores to drive safety, patient outcomes and staff confidence.

DataGen can help you clearly define improvement areas and implement actionable strategies based on data insights. We cover all Agency for Healthcare Research and Quality care settings and supplementals, including hospital, medical office, ambulatory surgery center, nursing home and pharmacy.

Get ready to:

- drive higher response rates with anonymous feedback;
- use web-based surveys and reporting to gain actionable data insights;
- compare results to system, facility or national benchmarks;
- develop a data-driven action plan to bring to leadership; and
- trend yearly progress to spot successes and opportunities.

You'll also access support at every step with:

- automated reminders to participants;
- marketing materials, including posters and table tents for break rooms and common areas;
- email templates to notify your staff of survey open and close dates;
- video tutorials instead of pages of documentation; and
- consulting services to help interpret survey results, identify improvement areas and develop effective action plans.

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